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ATTOK . 9983 OCKP. 5/7 BER 19603/3541 (CRF D-2694A)

As a below named inventor, I licreby declare that:

ly résiden	nce, post office address and citize	enship are as stated b	elow next to m	y name.			1
believe I (Wed deloy	am the original, first and sole in which is	ventor (if only one no claimed and for whi	ame is listed bel	low) or an original, i ought on the invention			
VIV	O MULTIPHOTON DIAG	NOSTIC DETEC	TION AND I	MAGING OF A	NEURODEG	KNERATIVI —————	UISEASE
specific	eation of which (check only one	item below):					
[]	is attached hereto.						
[X]	was filed as U.S. Patent Appl (if applicable).	lication Serial No. 10	0/001,643 on Oc				
[]	was filed as PCT Internations	al Application No.	on _	and max	s amended under	PCT Article 19	on on
	(if applicable),						
mendmer	tate that I have reviewed and und the trafferred to above.						
Federal K	edge the duty to disclose inform						
internation application States of A	claim priority benefits under Titlenal application(s) designating at on(s) for patent or inventor's cert America lited by me on the same	ificate or any PCT in e subject marter havi	nternational app ing a filing date	lication(s) designati before that of the ap	ng of least one co	unity other the	m the United
PRIOR A	APPLICATION(S) AND ANY P	RIORITY CLAIMS	UNDER 35 U.	S.C. 119	710	PRIORITY C	'I AIMED
(1	COUNTRY IF PCT, indicate "PCT")	APPLICATION	NUMBER	DATE OF FIL (day, month, y	ear)	UNDER 35	USC 119
	United States	G0/245	,306	2-NOV-200	10	[X] YES [1 NO
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designati disclosed the duty	claim the henefit under Title 35, ing the United States of America in that/those prior application(s to disclose material information application(s) and the national of the section is the section of th	a that is/are listed och in the manner prov as defined in Title 3 or PCT International	vided by the firs 17. Code of Fede filing date of th	t paragraph of Title eral Regulations, § I iis application:	35, United States 56(8) Which occ	Code, § 112, Ì turred between	l acknowledge the filing date of
PRIOR U	U.S. APPLICATIONS OR PCT	INTERNATIONAL	APPLICATION	NS DESIGNATING			DER 35 U.S.C.
	U.S. APPLICAT	IONS			STATUS (Che		ABANDONEI
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U.S. SERIAL NUMBERS ASSIGNED (if any)

PCT APPLICATIONS DESIGNATING THE U.S.

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FILING DATE

Page 1 of 3

PCT APPLICATION NO.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTUKNEY (Continue)

ATTORNEY'S DOCKET NUMBER 19603/3541 (CRF D-2694A)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Michael I. Goldman, Registration No. 30,727; Joseph M. Noto, Registration No. 32,163; Ann R. Pokalsky, Registration No. 34,697; Gunnar G. Leinberg, Registration No. 35,584; Edwin V. Merkel, Registration No. 40,087; Georgia Evans, Registration No. 41,597; Alice Y. Choi,

end	Correspondence to:	Michael L. Goldman NIXON PEABODY LL Clinton Square, P.O. R Rochester, New York 1	nx 31051 4603	(name at Michae (716) 26	clephone Calls to: nd telephone number) 1 L. Guldman 63-1304 SECOND GIVEN NAME	
	FULL NAME OF INVENTOR	FAMILY NAME Hyman	FIRST GIVEN NAME Bradley		Γ.	
))	RESIDENCE & CITIZENSHIP	CITY Charlestown	STATE/FOREIGN COUNTRY Massachusetts		COUNTRY OF CITIZENSHIP United States	
	POST OFFICE ADDRESS	P.O. ADDRESS 114 16 th Street, (CAGN 2009)	CITY Charlestown		STATE & ZIP CODE/CTRY Massachusetts 02129/USA SECOND GIVEN NAME	
	FIII.I. NAME OF INVENTOR	FAMILY NAME Christie	FIRST GIVEN NAME Richard		COUNTRY OF CITIZENSHIP	
2	RESIDENCE & CITIZENSHIP	CITY New York	STATF/FOREIGN COUN New York		United States STATE & ZIP CODE/CTRY	
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	FULL NAME OF INVENTOR	FAMILY NAME Bacskai	FIRST GIVEN NAME Brian STATE/FOREIGN COUN	_	COUNTRY OF CITIZENSHIP	
2 RESID	RESIDENCE & CITIZENSHIP	CITY Charlestown	Massachusetts		United States STATE & ZIP CODE/CTRY	
ڌ	POST OFFICE ADDRESS	P.O. ADDRESS 114 16th Street (CAGN 2750)	CITY Charlestown	_	Massachusetts 02129/USA SECOND GIVEN NAME	
	FULL NAME OF INVENTOR	FAMILY NAME Webb	FIRST GIVEN NAME Watt	10001	W, COUNTRY OF CITIZENSHIP	
2.0	RESIDENCE & CITIZENSHIP	CITY Ithaca	STATE/FOREIGN COUNTRY New York CITY Ithaca		United States STATE & ZIP CODE/CTRY New York 14850/USA SECOND GIVEN NAME	
4	POST OFFICE ADDRESS	P.O. ADDRESS 9 Parkway Place				
	FULL NAME OF INVENTOR	FAMILY NAME Zipfel	FIRST GIVEN NAME Warren	m v	R. COUNTRY OF CITIZENSHII	
0	RESIDENCE & CITIZENSIUP	CITY Ithaca	STATE/FOREIGN COU New York	NIKI	United States	
5	POST OFFICE ADDRESS	P.O. ADDRESS 535 Enfield Center Road	CITY Ithaca		STATE & ZIP CODE/CTRY New York 14850/USA	
_	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME. STATE/FOREIGN COUNTRY		SECUND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY			COUNTRY OF CITIZENSHI STATE & ZIP CODE/CTRY	
б	POST OFFICE ADDRESS	P.O. ADDRESS	CITY		Page 2 of 3	

. May. 14. 2002 No. 9983 NIXON PEABODY LLP #2 4:17PM

I hereby declare that all statements made herein of my own knowledge are true and that an statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statement may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 201 DATE 5/23/02 SIGNATURE OF INVENTOR 206 SIGNATURE OF INVENTOR 205 SIGNATURE OF INVENTOR 204 DATE DATE DATE

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PCT APPLICATIONS DESIGNATING THE U.S.

PCT

FILING DATE

ATTORNEY'S DOCKET NUMBER 19603/3541 (CRF D-2694A)

(Includes Reference to PCT International Applications) JUN 1 7 2002 As a below named inventor, I hereby declare that: ated below next to my name. My residence, post office address and citizenship are as I believe I am the original, first and sole inventor (if only on the state of below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: IN VIVO MULTIPHOTON DIAGNOSTIC DETECTION AND IMAGING OF A NEURODEGENERATIVE DISEASE the specification of which (check only one item below): is attached hereto. was filed as U.S. Patent Application Serial No. 10/001,643 on October 31, 2001 and was amended on _ [X] (if applicable). and was amended under PCT Article 19 on was filed as PCT International Application No. _____ on ___ [] (if applicable). I hereby state that I have reviewed and understand the contents of the above-identified specifications, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a). I hereby claim priority benefits under Title 35, United States Code, § 119 of any application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States listed below and have also identified below any application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed: PRIOR APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119: PRIORITY CLAIMED DATE OF FILING COUNTRY **UNDER 35 USC 119** APPLICATION NUMBER (day, month, year) (IF PCT, indicate "PCT") 2-NOV-2000 [X] YES [] NO 60/245,306 **United States** []YES[]NO []YES[]NO I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application: PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120: STATUS (Check One) U.S. APPLICATIONS **ABANDONED** PENDING **PATENTED** U.S. FILING DATE U.S. APPLICATION NUMBER

U.S. SERIAL NUMBERS

ASSIGNED (if any)

PCT

APPLICATION NO.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continue)

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ATTORNEY'S DOCKET NUMBER 19603/3541 (CRF D-2694A)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attoriey(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office Congregation Herewith. Michael L. Goldman, Registration No. 30,727; Joseph M. Noto, Registration No. 32,163; Ann R. Pokalsky, Registration No. 34,697; Gunnar G. Leinberg, Registration No. 35,584; Edwin V. Merkel, Registration No. 40,087; Georgia Evans, Registration No. 44,597; Alice Y. Choi, Registration No. 45,758

Send Correspondence to:	Michael L. Goldman	Direct Telephone Calls to:
_	NIXON PEABODY LLP	(name and telephone number)
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	Rochester, New York 14603	(716) 263-1304

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	FULL NAME OF INVENTOR	FAMILY NAME Hyman	FIRST GIVEN NAME Bradley		SECOND GIVEN NAME T.	
2 0 1	RESIDENCE & CITIZENSHIP	CITY Charlestown	STATE/FOREIGN COUNTRY Massachusetts		COUNTRY OF CITIZENSHIP United States	
	POST OFFICE ADDRESS	P.O. ADDRESS 149 13 th Street	CITY Charlestown		STATE & ZIP CODE/CTRY Massachusetts 02129/USA	
	FULL NAME OF INVENTOR	FAMILY NAME Christie	FIRST GIVEN NAME Richard		SECOND GIVEN NAME	
2 0 2	RESIDENCE & CITIZENSHIP	CITY Boston	STATE/FOREIGN COUN Massachusetts	TRY	COUNTRY OF CITIZENSHIP United States	
	POST OFFICE ADDRESS	P.O. ADDRESS 28 Castelton Street #2	CITY Boston		STATE & ZIP CODE/CTRY Massachusetts 02130/USA	
	FULL NAME OF INVENTOR	FAMILY NAME Bacskai	FIRST GIVEN NAME Brian		SECOND GIVEN NAME	
0 3	RESIDENCE & CITIZENSHIP	CITY Charlestown	STATE/FOREIGN COUN Massachusetts	TRY	COUNTRY OF CITIZENSHIP United States	
	POST OFFICE ADDRESS	P.O. ADDRESS 149 13 th Street	CITY Charlestown		STATE & ZIP CODE/CTRY Massachusetts 02129/USA	
	FULL NAME OF INVENTOR	FAMILY NAME Webb	FIRST GIVEN NAME Watt		SECOND GIVEN NAME W.	
2 0 4	RESIDENCE & CITIZENSHIP	CITY Ithaca	STATE/FOREIGN COUN New York	TRY	COUNTRY OF CITIZENSHIP Unites States	
	POST OFFICE ADDRESS	P.O. ADDRESS 9 Parkway Place	CITY Ithaca		STATE & ZIP CODE/CTRY New York 14850/USA	
	FULL NAME OF INVENTOR	FAMILY NAME Zipfel	FIRST GIVEN NAME Warren		SECOND GIVEN NAME R.	
2 0 5	RESIDENCE & CITIZENSHIP	CITY Ithaca	STATE/FOREIGN COUN New York	TRY	COUNTRY OF CITIZENSHIP United States	
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	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME	
2 0 6	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY		STATE & ZIP CODE/CTRY	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statement may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
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